Fill in this information to identify your case:		i
United States Bankruptcy Court for the:		
DISTRICT OF NEVADA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this amended filir

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Kathleen First name  Ann Middle name  Harrigan Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7493	

Debtor 1 Kathleen Ann Harrigan

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)  EINs		
5.	Where you live	2465 Luminous Stars Street	If Debtor 2 lives at a different address:		
		Henderson, NV 89044  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Clark			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Chap	oter 7				
		☐ Chap	oter 11				
		☐ Chap	oter 12				
		☐ Chap	oter 13				
8.	How you will pay the fee	ab or	will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.				
					this option, sign and attach the Application for Inc	dividuals to Pay	
		☐ Ir	equest th		nis option only if you are filing for Chapter 7. By la only if your income is less than 150% of the officia		
		ap	plies to yo	ur family size and you are unable to pay	the fee in installments). If you choose this option, yed (Official Form 103B) and file it with your petition	you must fill out	
9.	Have you filed for bankruptcy within the last 8 years?	■ No.					
	•		District	When	Case number		
			District	When	Coop number		
			District	When	Case number		
10.	Are any bankruptcy cases pending or being	■ No		_			
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor		Relationship to you		
			District	When	Case number, if known		
			Debtor		Relationship to you		
				When	Case number, if known		
			District				
11.	Do you rent your	■ No.		ine 12.			
111.	Do you rent your residence?	■ No.	Go to	ine 12.	nt against you?		
			Go to		ıt against you?		

Debtor 1 Kathleen Ann Harrigan

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Debtor 1 Kathleen Ann Harrigan					Case number (if known)	
Par	t 3: Report About Any Bu	icinoccoc	Vall Owr	a as a Solo Bronrio	tor	
		1311103303	Tou Owi	r as a sole i roprie		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	e and location of bus	siness	
	A sole proprietorship is a	<b>—</b> 100.				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any		
	If you have more than one sole proprietorship, use a		Numb	oer, Street, City, Stat	te & ZIP Code	
	separate sheet and attach it to this petition.		Chec	k the appropriate bo	ox to describe your business:	
	·				ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	е	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).	deadline operation	s. If you in ns, cash-f S.C. 1116 I am i I am f Code	ndicate that you are low statement, and f (1)(B). not filing under Chapfiling under Chapfiling under Chapter	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure oter 11.  11, but I am NOT a small business debtor according to the definition in the Bankruptcy  11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
		<b>—</b> 100.				
Par	Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
	- ,				Number, Street, City, State & Zip Code	

Debtor 1 Kathleen Ann Harrigan

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	hat kind of debts do	ions for R	eporting Purposes			
	What kind of debts do 16a. you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."			
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.				ots that you incurred to obtain ousiness or investment.
			☐ No. Go to line 16c.		.,	
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consur	mer debts or busin	ness debts
	re you filing under hapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.		
af	o you estimate that ter any exempt operty is excluded and	■ Yes.	I am filing under Chapter 7. are paid that funds will be a			roperty is excluded and administrative expenses ors?
ac	lministrative expenses		■ No			
	e paid that funds will available for		☐ Yes			
di	stribution to unsecured editors?		1 100			
18. H	ow many Creditors do	1-49		<b>1</b> ,000-5,000		□ 25,001-50,000
	ou estimate that you we?	☐ 50-99		□ 5001-10,000		☐ 50,001-100,000
OV	we:	□ 100-1	99	<b>1</b> 0,001-25,00	00	☐ More than100,000
		□ 200-9	99			
	ow much do you	□ \$0 - \$	50,000	□ \$1,000,001 -	- \$10 million	☐ \$500,000,001 - \$1 billion
	stimate your assets to e worth?		01 - \$100,000	\$10,000,001		□ \$1,000,000,001 - \$10 billion
			001 - \$500,000	□ \$50,000,001	- \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		<b>□</b> \$500,	001 - \$1 million	<b>—</b> \$100,000,00	71 - \$500 million	Li More than \$50 billion
	ow much do you	□ \$0 - \$		<b>1</b> \$1,000,001 -		□ \$500,000,001 - \$1 billion
	stimate your liabilities be?	_	001 - \$100,000	\$10,000,001		\$1,000,000,001 - \$10 billion
		_ ' ' '	001 - \$500,000	□ \$50,000,001 □ \$100,000,00	- \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
	_	<b>\$500</b> ,	001 - \$1 million	<b>—</b> \$100,000,00	71 - \$300 million	T More than \$50 billion
Part 7:	Sign Below					
For you	u	I have ex	amined this petition, and I de	eclare under penalty of p	perjury that the info	ormation provided is true and correct.
						ole, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		bankrupt and 3571	cy case can result in fines up			y or property by fraud in connection with a 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
			leen Ann Harrigan		Cignotius of Date	otor 2
			n Ann Harrigan e of Debtor 1		Signature of Deb	JIUI Z
		Executed	on July 18, 2019		Executed on	
			MM / DD / YYYY		_	MM / DD / YYYY

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Debtor 1	Kathleen Ann Harrigan	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Miguel Lopez Signature of Attorney for Debtor	Date	July 18, 2019 MM / DD / YYYY			
Miguel Lopez 11410 Printed name					
Law Office of Miguel Lopez, P.C.					
7620 Tiny Tortoise Las Vegas, NV 89149					
Number, Street, City, State & ZIP Code  Contact phone (702) 987-3030	Email address	mlopez@lopezbklaw.com			
11410 NV  Bar number & State	Linaii addiess	ппоред вторедоктам.сопт			

Certificate Number: 13858-NV-CC-033116581



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on July 16, 2019, at 1:10 o'clock PM PDT, Kathleen Harrigan received from MoneySharp Credit Counseling Inc., an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the District of Nevada, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: July 16, 2019 By: /s/Wendel Ruegsegger

Name: Wendel Ruegsegger

Title: Counselor

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquid	ation
\$24	5 filing fee	
\$7	5 administ	rative fee
+ \$1	5 trustee s	<u>urcharge</u>
\$33	5 total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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	in this intermedian to blood to come				
	n this information to identify your ca				
Deb	tor 1 Kathleen Ann Harri	gan  Middle Name	Last Name		
	tor 2				
` '	ise if, filing) First Name	Middle Name	Last Name		
Unit	ed States Bankruptcy Court for the:	DISTRICT OF NEVADA			
Cas (if kn	e number			_	if this is an
				amend	led filing
	icial Form 106Sum				
			d Certain Statistical Information	-	2/15
infor		first; then complete the	are filing together, both are equally responsible for information on this form. If you are filing amenous the box at the top of this page.		
Pari			and box at the top of the page.		
				Your as	sets
					f what you own
1.	Schedule A/B: Property (Official Form	n 106A/B)		\$	336,346.00
	•			Ψ	·
	1b. Copy line 62, Total personal proper	rty, from Schedule A/B		\$	28,560.00
	1c. Copy line 63, Total of all property o	n Schedule A/B		\$	364,906.00
Part	2: Summarize Your Liabilities				
				Your lia	bilities
				Amount	you owe
2.	Schedule D: Creditors Who Have Clair 2a. Copy the total you listed in Column		Official Form 106D) be bottom of the last page of Part 1 of <i>Schedule D</i>	\$	495,700.00
3.	Schedule E/F: Creditors Who Have Un 3a. Copy the total claims from Part 1 (		Form 106E/F) ) from line 6e of <i>Schedule E/F</i>	\$	20,000.00
	3b. Copy the total claims from Part 2 (	nonpriority unsecured cla	ims) from line 6j of Schedule E/F	\$	142,256.00
			Your total liabilities	\$	657,956.00
Part	3: Summarize Your Income and Ex	xpenses			
4.	Schedule I: Your Income (Official Form Copy your combined monthly income f			\$	4,701.00
5.	Schedule J: Your Expenses (Official Fo			\$	3,557.00
Part	4: Answer These Questions for Ad	dministrative and Statist	tical Records		
6.	Are you filing for bankruptcy under to No. You have nothing to report on	•	eck this box and submit this form to the court with yo	our other sch	edules.
7.	■ Yes What kind of debt do you have?				
			ebts are those "incurred by an individual primarily for for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
		nsumer debts. You have	e nothing to report on this part of the form. Check thi	s box and su	ıbmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Kathleen Ann Harrigan

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,149.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	20,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	20,000.00

		Case 19-	14592-abi	DOC 1	L Entered	07/18/19 13:3	34:31 F	age 15 of	51	
Fill	in this inform	ation to identify	your case and th	nis filing	j:					
Deb	otor 1	Kathleen Ar								
	otor 2	First Name		e Name		ast Name				
(Spoi	use, if filing)	First Name	Middle	e Name	L	ast Name				
Unit	ed States Ban	kruptcy Court fo	r the: DISTRICT	OF NEV	/ADA					
Cas	e number								☐ Check if this amended filir	
		m 106A/E <b>A/B: P</b>	_						12/15	
infor	mation. If more ver every questi	space is needed, on.	attach a separate s	heet to th	his form. On the to	re filing together, both op of any additional pa or Have an Interest In				
	No. Go to Part 2									
1.1				What	is the property?	Check all that apply				
		nous Stars Stars Stars available, or other de			Single-family hon Duplex or multi-u Condominium or	nit building	the amo	deduct secured claims or exemptions. Put ount of any secured claims on Schedule D ors Who Have Claims Secured by Property		
	Henderson	NV	89044-0000		Manufactured or Land	mobile home		value of the roperty?	Current value of the portion you own?	
	City	State	ZIP Code		Investment prope	erty	\$	336,346.00	\$336,34	6.00
					Other	(such a	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.			
				WIIO	Debtor 1 only	the property? Check on	Fee si			
	Clark				Debtor 2 only					
	County				Debtor 1 and Deb At least one of th	otor 2 only e debtors and another		eck if this is com	munity property	
				Other		wish to add about this	item, such as	slocal		

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Debt	or 1 _	Kathleen Ann Harri	igan			Case r	number (if known)			
	If you	own or have more	than one, list	here:						
1.2	•		•		is the property? Check all that apply					
_		alkirk Bay			Single-family home	aims or exemptions. Put				
	Street add	dress, if available, or other desc	cription		Duplex or multi-unit building		the amount of any secure			
					Condominium or cooperative		Creditors who have Clair	Current value of the portion you own?  Unknown  Our ownership interest ancy by the entireties, or same or exemptions. Put dictaims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$13,945.00		
				Ц						
					Manufactured or mobile home		Current value of the	Current value of the		
	Oxnar	d CA	93035-0000		Land		entire property?			
	City	State	ZIP Code		Investment property		Unknown	Unknown		
					Timeshare		Describe the nature of v	our ownership interest		
					Other		(such as fee simple, ten	ancy by the entireties, or		
				Who	has an interest in the property? Chec	ck one	a life estate), if known.			
					Debtor 1 only	-	Joint tenant			
_	Ventu	ra		_ 🗆	Debtor 2 only					
	County				Debtor 1 and Debtor 2 only		☐ Check if this is con	munity property		
					At least one of the debtors and another	ner	(see instructions)	71 11 7		
					r information you wish to add about t erty identification number:	nation you wish to add about this item, such as local ntification number:				
				Deb	tor Surrendered her interest	in this	property via her 20	14 Divorce.		
					your entries from Part 1, includir r here			\$336,346.00		
Part 2	Desc	ribe Your Vehicles								
some	one else		vehicle, also rep	ort it on S	ny vehicles, whether they are re Schedule G: Executory Contracts a rcycles			ehicles you own that		
	Yes									
3.1	Make:	Hyundai	,	Who has a	n interest in the property? Check one		Do not deduct secured c	aims or exemptions. Put		
0		Canadia		_						
	Model: Year:	2015		Debtor	•					
		ximate mileage:		Debtor 2			Current value of the entire property?			
		information:		_	1 and Debtor 2 only one of the debtors and another		chare property:	portion you own:		
		tion: 2465 Luminou		At least	one of the deptors and another					
		t, Henderson NV 89		Check i	f this is community property ructions)		\$13,945.00	\$13,945.00		
3.2	Make:			Vho has a	n interest in the property? Check one		Do not deduct secured co			
	Model:	Grand Cherokee	e l	Debtor	1 only		Creditors Who Have Cla			
	Year:	2004		Debtor 2	2 only		Current value of the	Current value of the		
	Approx	kimate mileage:	230,000	Debtor •	1 and Debtor 2 only		entire property?	portion you own?		
	Other i	information:	_		one of the debtors and another					
	Loca	tion: 2465 Luminou	s Stars				<b>***</b>	****		
	Stree	t, Henderson NV 89	0044	Check i	f this is community property ructions)		\$941.00	\$941.00		

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Debto	or 1 Kathleen Ann Harrigan	Case numb	oer (if known)	
	atercraft, aircraft, motor homes, ATVs and other recreational vehicles, other amples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobined.			
	dd the dollar value of the portion you own for all of your entries from Par ages you have attached for Part 2. Write that number here			\$14,886.00
Part 3	3: Describe Your Personal and Household Items			
•	ou own or have any legal or equitable interest in any of the following iter	ns?	<b>po</b> Do	rrent value of the rtion you own? not deduct secured ims or exemptions.
Ex —	busehold goods and furnishings  xamples: Major appliances, furniture, linens, china, kitchenware  No  Yes. Describe			
	Living Room Set, Dining Room Set, Bedroom Furniture Items. Location: 2465 Luminous Stars Street, Hend	. ,,		\$5,000.00
Ex	ectronics  xamples: Televisions and radios; audio, video, stereo, and digital equipment; of including cell phones, cameras, media players, games  No  Yes. Describe	omputers, printers, scanr	ners; music collection	s; electronic devices
	Laptop Computer, TV's (3), Cellular Phone, a Items. Location: 2465 Luminous Stars Street, Hend			\$3,000.00
Ex	bilectibles of value  xamples: Antiques and figurines; paintings, prints, or other artwork; books, pict other collections, memorabilia, collectibles  No Yes. Describe	ures, or other art objects;	; stamp, coin, or base	ball card collections;
Ex	quipment for sports and hobbies xamples: Sports, photographic, exercise, and other hobby equipment; bicycles musical instruments	, pool tables, golf clubs, s	skis; canoes and kaya	ks; carpentry tools;
	No Yes. Describe			
E	<b>Firearms</b> Examples: Pistols, rifles, shotguns, ammunition, and related equipment No			
	Yes. Describe			
	Clothes  Examples: Everyday clothes, furs, leather coats, designer wear, shoes, access	ories		

Official Form 106A/B Schedule A/B: Property page 3

Location: 2465 Luminous Stars Street, Henderson NV 89044

Misc. Clothing Items.

☐ No

Yes. Describe.....

\$2,000.00

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Debtor 1	Kathleen Ann Harrig	gan	Case number (if know	wn)
12. <b>Jewel</b> i Exam		stume jewelry, engagem	ent rings, wedding rings, heirloom jewelry, watches, gem	ıs, gold, silver
□ No ■ Yes.	. Describe			
			lewelry, and Misc. Jewelry Items.	
	Locat	ion: 2465 Luminous	Stars Street, Henderson NV 89044	\$2,500.00
Exam ■ No	arm animals oples: Dogs, cats, birds, ho	rses		
	Describe			
■ No	ther personal and house  Give specific information.	-	already list, including any health aids you did not lis	t
<b>□</b> 165.	. Give specific information.			
			3, including any entries for pages you have attached	\$12,500.00
Part 4: De	escribe Your Financial Asset	s		
Do you ov	wn or have any legal or e	quitable interest in any	y of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No □ Yes.	pples: Money you have in y		, in a safe deposit box, and on hand when you file your p	etition
	ples: Checking, savings, o		s; certificates of deposit; shares in credit unions, brokera h the same institution, list each.	ge houses, and other similar
□ No	,	vo manipio accounte vin	Institution name:	
■ Yes.			insututon name.	
	17.1.	Checking # 0299	Bank of America	\$784.00
	17.2.	Savings # 0433	Bank of America	\$40.00
	17.3.	Checking # 0953	Wells Fargo	\$350.00
	17.4.	Savings # 7952	Wells Fargo	\$0.00
	s, mutual funds, or public oples: Bond funds, investme		age firms, money market accounts	
■ No □ Yes.		Institution or issuer nam	ne:	
-	oublicly traded stock and venture	interests in incorporat	ed and unincorporated businesses, including an inte	rest in an LLC, partnership, and
■ No	. Give specific information	about them		
□ res.		me of entity:	% of ownership:	

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De	ebtor 1	Kathleen Ann Harrigan		Case number (if known)	
20.	Negoti	ment and corporate bonds and other negotiable instruments include personal checks, cashier egotiable instruments are those you cannot transfer	s' checks, promissory notes, and mo	ney orders.	
	☐ Yes.	Give specific information about them Issuer name:			
		nent or pension accounts eles: Interests in IRA, ERISA, Keogh, 401(k), 403(k	o), thrift savings accounts, or other pe	ension or profit-sharing plans	S
	☐ Yes.	List each account separately.  Type of account:	Institution name:		
22.	Your s	y deposits and prepayments hare of all unused deposits you have made so that lifes: Agreements with landlords, prepaid rent, publ			or others
			Institution name or individual:		
23.	Annuit ■ No	es (A contract for a periodic payment of money to	you, either for life or for a number of	years)	
	☐ Yes	Issuer name and description.			
		s in an education IRA, in an account in a quality. §§ 530(b)(1), 529A(b), and 529(b)(1).	fied ABLE program, or under a qua	alified state tuition prograr	n.
	☐ Yes	Institution name and description. Se	eparately file the records of any intere	ests.11 U.S.C. § 521(c):	
	■ No	equitable or future interests in property (other Give specific information about them	than anything listed in line 1), and	d rights or powers exercisa	able for your benefit
	Patents	s, copyrights, trademarks, trade secrets, and o			
	■ No	les: Internet domain names, websites, proceeds for Give specific information about them	om royalties and licensing agreemer	nts	
	Licens	es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperate	ive association holdings, liquor licens	ses, professional licenses	
	☐ Yes.	Give specific information about them			
Mo	oney or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	_	unds owed to you			
	■ No □ Yes.	Give specific information about them, including wh	ether you already filed the returns ar	nd the tax years	
	Examp ■ No	support  les: Past due or lump sum alimony, spousal support  Give specific information	ort, child support, maintenance, divor	ce settlement, property settl	ement
	Examp ■ No	amounts someone owes you  les: Unpaid wages, disability insurance payments benefits; unpaid loans you made to someone  Give specific information		n pay, workers' compensati	on, Social Security

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De	ebtor 1	Kathleen Ann Harrigan		Case number (if known)	
31.		ts in insurance policies oles: Health, disability, or life ins	surance; health savings account	(HSA); credit, homeowner's, or renter's insura	nce
	_	Name the insurance company Compan	of each policy and list its value. y name:	Beneficiary:	Surrender or refund value:
32.	If you a		you from someone who has dust, expect proceeds from a life i	lied insurance policy, or are currently entitled to rec	eive property because
	_	Give specific information			
33.	<i>Examp</i> □ No	oles: Accidents, employment dis	er or not you have filed a laws sputes, insurance claims, or righ	uit or made a demand for payment its to sue	
	Yes.	Describe each claim			
			Possible Medical Insurac	e/Malpractice claim.	Unknown
34.	■ No	contingent and unliquidated of Describe each claim	claims of every nature, includi	ing counterclaims of the debtor and rights t	o set off claims
	■ No	ancial assets you did not alro	eady list		
36			entries from Part 4, including	any entries for pages you have attached	\$1,174.00
Pa	rt 5: Des	scribe Any Business-Related Pro	perty You Own or Have an Interes	t In. List any real estate in Part 1.	
١	No. Go		e interest in any business-related	property?	
Pa		scribe Any Farm- and Commercia ou own or have an interest in farmla	al Fishing-Related Property You O	wn or Have an Interest In.	
46.		own or have any legal or eq	uitable interest in any farm- or	r commercial fishing-related property?	
	☐ Yes.	Go to line 47.			
Pa	rt 7:	Describe All Property You Own	or Have an Interest in That You D	oid Not List Above	
53.		have other property of any legical legisters. Season tickets, country clubs:	kind you did not already list? ub membership		
	☐ Yes.	Give specific information			
54	. Add t	he dollar value of all of your	entries from Part 7. Write that	number here	\$0.00

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Debtor 1	Kathleen Ann Harrigan			Case number (if known)	
Part 8:	List the Totals of Each Part of this Form				
55. <b>Part</b>	1: Total real estate, line 2				\$336,346.00
56. <b>Part</b>	2: Total vehicles, line 5		\$14,886.00		
57. <b>Part</b>	3: Total personal and household items, line 15		\$12,500.00		
58. <b>Part</b>	4: Total financial assets, line 36		\$1,174.00		
59. <b>Part</b>	5: Total business-related property, line 45		\$0.00		
60. Part	6: Total farm- and fishing-related property, line 52		\$0.00		
61. <b>Part</b>	7: Total other property not listed, line 54	+	\$0.00		
62. <b>Tota</b>	Il personal property. Add lines 56 through 61	_	\$28,560.00	Copy personal property total	\$28,560.00
63. <b>Tota</b>	of all property on Schedule A/B. Add line 55 + line 62				\$364,906.00

		Case 19-1459	92-ahl	Doc 1	Ente	red 07/18/19	9 13:34:31	Page 22	of 51	
		0430 13 1400	72 abi	<b>D</b> 00 1	Linto	100 01/10/10	7 10.04.01	T age 22	0.01	
FII	l in this inform	nation to identify your	case:							
De	btor 1	Kathleen Ann Ha						_		
De	btor 2	First Name	Middle	e Name		Last Name				
	ouse if, filing)	First Name	Middle	e Name		Last Name		_		
Un	ited States Bar	nkruptcy Court for the:	DISTRIC	T OF NEVA	NDA					
Ca	se number									
1	nown)								☐ Check if this is an amended filing	I
Of	fficial Fo	rm 106C								
S	chedule	e C: The Pr	operty	y You	Cla	im as Ex	empt			4/19
the nee	property you lis	nd accurate as possible, sted on <i>Schedule A/B: I</i> d attach to this page as nown).	Property (Off	ficial Form 1	106A/B) a	as your source, list	t the property tha	t you claim as e	exempt. If more space	e is
spe any func exe	cific dollar and applicable standard applicable standard applicable under the control of the con	property you claim as nount as exempt. Alter atutory limit. Some ex nlimited in dollar amo articular dollar amoun statutory amount.	rnatively, yo emptions— unt. Howev	ou may clai -such as th er, if you cl	im the fu lose for l laim an	ıll fair market valı health aids, right exemption of 100	ue of the proper s to receive cert % of fair marke	ty being exem tain benefits, a t value under a	pted up to the amou nd tax-exempt retire law that limits the	unt of ement
Pa	rt 1: Identif	y the Property You Cla	aim as Exer	mpt						
1.	Which set of	exemptions are you o	laiming? C	heck one or	nly, even	if your spouse is t	filing with you.			
	You are cla	aiming state and federa	l nonbankrup	ptcy exempt	tions. 1	1 U.S.C. § 522(b)(	3)			
	☐ You are cla	aiming federal exemptio	ns. 11 U.S.	.C. § 522(b)	)(2)					
2.	For any prop	erty you list on <i>Sched</i>	<i>lule A/B</i> tha	t you claim	n as exer	mpt, fill in the info	ormation below.			
	Briof doccrintia	on of the property and lin	oon Ci	urrent value	of the	Amount of the eve	mntion you claim	Specific	laws that allow evemn	tion

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2465 Luminous Stars Street Henderson, NV 89044 Clark County	\$336,346.00		\$336,346.00	Nev. Rev. Stat. §§ 21.090(1)(I) and 115.050
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	and 113.030
2004 Jeep Grand Cherokee 230,000 miles	\$941.00		\$941.00	Nev. Rev. Stat. § 21.090(1)(f)
Location: 2465 Luminous Stars Street, Henderson NV 89044 Line from <i>Schedule A/B</i> : 3.2			100% of fair market value, up to any applicable statutory limit	
Living Room Set, Dining Room Set, Bedroom Sets (2), and Misc.	\$5,000.00		\$5,000.00	Nev. Rev. Stat. § 21.090(1)(b)
Furniture Items. Location: 2465 Luminous Stars Street, Henderson NV 89044 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Laptop Computer, TV's (3), Cellular	\$3,000.00		\$3,000.00	Nev. Rev. Stat. § 21.090(1)(b)
Phone, and Misc. Electronic Items. Location: 2465 Luminous Stars Street, Henderson NV 89044 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	

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Debto	1 Kathleen Ann Harrigan			Case number (if known)	
Bi Se	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	lisc. Clothing Items.	\$2,000.00		\$2,000.00	Nev. Rev. Stat. § 21.090(1)(b)
S	ocation: 2465 Luminous Stars treet, Henderson NV 89044 ne from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit	
	/edding Ring, Costume Jewelry, nd Misc. Jewelry Items.	\$2,500.00		\$2,500.00	Nev. Rev. Stat. § 21.090(1)(a)
L S	treet, Henderson NV 89044 ne from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	hecking # 0299: Bank of America	\$784.00		\$784.00	Nev. Rev. Stat. § 21.090(1)(z)
Li	THE HOTH SCHEUUR PAB. 17.1			100% of fair market value, up to any applicable statutory limit	
	avings # 0433: Bank of America	\$40.00		\$40.00	Nev. Rev. Stat. § 21.090(1)(z)
L	The Hoth Schedule AVD. 17.2			100% of fair market value, up to any applicable statutory limit	
	hecking # 0953: Wells Fargo ne from Schedule A/B: 17.3	\$350.00		\$350.00	Nev. Rev. Stat. § 21.090(1)(z)
	The Hoth Generalic AVE. 17.0			100% of fair market value, up to any applicable statutory limit	
	ossible Medical surace/Malpractice claim.	Unknown			Nev. Rev. Stat. § 21.090(1)(z)
	ne from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	
	ossible Medical surace/Malpractice claim.	Unknown		\$16,150.00	Nev. Rev. Stat. § 21.090(1)(u)
	ne from <i>Schedule A/B</i> : <b>33.1</b>			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption Subject to adjustment on 4/01/22 and every No Yes. Did you acquire the property cover No Yes	3 years after that for ca	ises fi	·	,

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Cas	SC 13-1438	92-abi Doc 1 Entered 07/10	119 15.54.51		
Fill in this information to	identify your	case:			
Debtor 1 Kath	leen Ann Ha	rrigan  Middle Name  Last Name			
Debtor 2 (Spouse if, filing) First No.		Middle Name Last Name			
United States Bankruptcy	Court for the:	DISTRICT OF NEVADA			
Case number (if known)				_	if this is an
Official Form 106l Schedule D: Ci		Who Have Claims Secure	ed by Propert	<b>v</b>	12/15
Be as complete and accurate	e as possible. If	two married people are filing together, both are e ut, number the entries, and attach it to this form.	equally responsible for su	ipplying correct informa	
1. Do any creditors have cla	ims secured by	your property?			
	• •	s form to the court with your other schedules.	You have nothing else t	o report on this form	
_		•	Tod flave flotfillig else t	o report on this form.	
■ Yes. Fill in all of the	e information be	elow.			
Part 1: List All Secure	ed Claims		0-1	O-lime D	0-1
		ore than one secured claim, list the creditor separate		Column B	Column C Unsecured
		n particular claim, list the other creditors in Part 2. As all order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	portion
2.1 Internal Revenue	Service	Describe the property that secures the claim:	value of collateral. \$40,000.00	claim \$0.00	If any <b>\$40,000.00</b>
Creditor's Name		Tax Lien	Ψ40,000.00	φυ.υυ	<del>\$40,000.00</del>
Centralized Insol		Tax Elon			
Operations		A control of the decision of t			
P.O. Box 7346		As of the date you file, the claim is: Check all that apply.			
Philadelphia, PA 19101-7346		Contingent			
Number, Street, City, State	& Zip Code	☐ Unliquidated			
•	•	☐ Disputed			
Who owes the debt? Chec		Nature of lien. Check all that apply.			
Debtor 1 only		$\square$ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2 on	ly	■ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors	s and another	☐ Judgment lien from a lawsuit			
Check if this claim relate community debt	es to a	Other (including a right to offset)			
Date debt was incurred		Last 4 digits of account number 7493			

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Debtor 1 Kathleen Ann Harrigan		Case number (if known)		
First Name Middle N	Name Last Name	-		
2.2 KIA Motors Finance	Describe the property that secures the claim:	\$20,881.00	\$13,945.00	\$6,936.00
Creditor's Name	2015 Hyundai Genesis 63,000 miles Location: 2465 Luminous Stars			
P.O. Box 20835 Fountain Valley, CA 92728-0835	Street, Henderson NV 89044  As of the date you file, the claim is: Check all that apply.  Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 11/2015	Last 4 digits of account number 042	4		
2.3 Nationstar Mortgage	Describe the property that secures the claim:	\$434,819.00	Unknown	Unknown
Creditor's Name	4500 Falkirk Bay Oxnard, CA 93035 Ventura County			
	Debtor Surrendered her interest in this property via her 2014 Divorce.			
P.O. Box 619096 Dallas, TX 75261-9741	As of the date you file, the claim is: Check all that apply.  Contingent	-		
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 359	1		
Add the deller value of value of the control of the	Delumin A on this area. Write that must be be	\$40E 700 0		
Add the dollar value of your entries in C If this is the last page of your form, add	Column A on this page. Write that number here:	\$495,700.0	-	
Write that number here:	i ine donar value totais iroin dii payes.	\$495,700.0	0	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Fill in this inforn	nation to identify your case:						
Debtor 1	Kathleen Ann Harriga	n					
Dahtaro	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court for the: DIS	STRICT OF NEVADA					
Simod States Bal					-		
Case number						□ Chook	if this is an
(ii kilowily						_	if this is an led filing
						'	Ü
Official Forn							4045
	/F: Creditors Who						12/15
Schedule G: Execu Schedule D: Credit left. Attach the Con name and case num	racts or unexpired leases that of tory Contracts and Unexpired L tors Who Have Claims Secured I tinuation Page to this page. If y nber (if known).	eases (Official Form 1060 by Property. If more space ou have no information to	6). Do not include a e is needed, copy t	any credit he Part yo	ors with partially sou need, fill it out,	secured claims that a number the entries i	are listed in n the boxes on the
	ors have priority unsecured claim						
☐ No. Go to P	art 2.						
Yes.							
identify what typ possible, list the	priority unsecured claims. If a pe of claim it is. If a claim has both a claims in alphabetical order accu than one creditor holds a particula	n priority and nonpriority amording to the creditor's name	ounts, list that claim e. If you have more	here and	show both priority a	and nonpriority amoun	ts. As much as
(For an explana	ation of each type of claim, see the	e instructions for this form ir	the instruction boo		Total claim	Priority amount	Nonpriority amount
	Revenue Service	Last 4 digits of acc	count number 74	193	\$20,000.00	\$20,000.00	\$0.00
,	editor's Name ized Insolvency	When was the deb	ot incurred?				
Operati	ons					-	
P.O. Bo							
	Iphia, PA 19101-7346 treet City State Zip Code	As of the date you	file, the claim is: (	Check all t	hat apply		
Who incurred	the debt? Check one.	☐ Contingent	•				
■ Debtor 1 o	nly	☐ Unliquidated					
Debtor 2 o	nly	☐ Disputed					
Debtor 1 a	and Debtor 2 only	Type of PRIORITY	unsecured claim:				
☐ At least or	ne of the debtors and another	☐ Domestic suppo	ort obligations				
☐ Check if t	his claim is for a community de	ebt Taxes and certa	ain other debts you o	owe the go	vernment		
Is the claim s	subject to offset?	☐ Claims for death	n or personal injury v	while you	vere intoxicated		
■ No		Other. Specify					_
☐ Yes			2015 to 2018	Tax Ret	urns		
Part 2: List A	I of Your NONPRIORITY Un	secured Claims					
3. Do any credito	ors have nonpriority unsecured	claims against you?					
☐ No. You hav	ve nothing to report in this part. Su	ubmit this form to the court v	with your other sche	dules.			
Yes.							
		to the about the first	e dha a sa Pe	hal !	ah alabu v		
unsecured clair	n, list the creditor separately for e or holds a particular claim, list the	ach claim. For each claim li	sted, identify what ty	ype of claii	m it is. Do not list cla	aims already included	in Part 1. If more

Total claim

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Debtor	1 Kathleen Ann Harrigan	Case number (if known)				
4.1	Aargon Agency	Last 4 digits of account number 7608	\$56,236.00			
	Nonpriority Creditor's Name 8668 Spring Mountain Road Las Vegas, NV 89117	When was the debt incurred? 07/2017	-			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Collections Agency - UMC	-			
4.2	Aargon Agency Nonpriority Creditor's Name	Last 4 digits of account number	\$462.00			
	8668 Spring Mountain Road Las Vegas, NV 89117	When was the debt incurred? 09/2017	-			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	□ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes					
	Yes	Other. Specify Collections Agency - UMC	-			
4.3	American Express	Last 4 digits of account number	\$2,455.00			
	Nonpriority Creditor's Name P.O. Box 981535 El Paso, TX 79998-1535	When was the debt incurred? 07/2014	_			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	□ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit Card	_			

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Debt	or 1 Kathleen Ann Harrigan	Case number (if known)	
4.4	DSNB/Macy's	Last 4 digits of account number 4425	\$980.00
	Nonpriority Creditor's Name P.O. Box 8218	When was the debt incurred? 07/2004	
	Mason, OH 45040  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Charge Account	
4.5	IC Systems Collections	Last 4 digits of account number 7332	\$55.00
	Nonpriority Creditor's Name P.O. Box 64378 Saint Paul, MN 55164-0378	When was the debt incurred? 05/2017	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Collections Agency - Intermountain Healthcare	
4.6	IC Systems Collections	Last 4 digits of account number 9385	\$222.00
	Nonpriority Creditor's Name P.O. Box 64378	When was the debt incurred? 12/2018	
	Saint Paul, MN 55164-0378  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Collections Agency - Intermountain Healthcare	

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Debto	1 Kathleen Ann Harrigan		Case number (if known)	
4.7	JPMCB Card Services	Last 4 digits of account number	7215	\$12,305.00
	Nonpriority Creditor's Name PO Box 15369 Wilmington, DE 19850	When was the debt incurred?	07/2014	
	Wilmington, DE 19850  Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separ	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.8	Plus Four, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	8670	\$1,652.00
	P.O. Box 95846 Las Vegas, NV 89193-5846	When was the debt incurred?	06/2017	
	Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separate port as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Solutions	Agency - Desert Radiology	
4.9	Portfolio Recovery	Last 4 digits of account number	5963	\$856.00
	Nonpriority Creditor's Name 120 Corporate Blvd Norfolk, VA 23502	When was the debt incurred?	09/2016	
	Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separ	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	n plans, and other similar debts	
		, , ,		
	☐ Yes	Other. Specify Collections	Agency - Comenity bank	

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Debtor	1 Kathleen Ann Harrigan	Case number (if known)				
4.1			-			
0	SYNCB/ToysRUs	Last 4 digits of account number 030	<u></u>	\$2,644.00		
	Nonpriority Creditor's Name P.O. Box 965015 Orlando, FL 32896-5015	When was the debt incurred? 04/	2014			
	Number Street City State Zip Code	As of the date you file, the claim is: Che	eck all that apply			
	Who incurred the debt? Check one.	,				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured clain	n:			
	_	☐ Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation	agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	agreement of divorce that you did not			
	No	Debts to pension or profit-sharing plan	s, and other similar debts			
	☐ Yes	Other. Specify Credit Card				
4.1			_			
1	UCLA Medical Group	Last 4 digits of account number 749	<u> </u>	\$1,400.00		
	Nonpriority Creditor's Name PO Box 748156	When was the debt incurred?				
	Los Angeles, CA 90074-8156					
	Number Street City State Zip Code	As of the date you file, the claim is: Che	eck all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured clain	n:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation	agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing plan	s, and other similar debts			
	Yes	■ Other. Specify Medical Service				
4.1	UMC	Last 4 digits of account number 749	12	\$56,236.00		
2	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ30,230.00		
	1800 W. Charleston Blvd.	When was the debt incurred?				
	Las Vegas, NV 89102					
	Number Street City State Zip Code	As of the date you file, the claim is: Che	eck all that apply			
	Who incurred the debt? Check one.	_				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured clain	n:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation	agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing plan				
	Yes	■ Other. Specify Medical Service	S			

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Wells Fargo Bank, N.A.	Last 4 digits of account number	2982	\$6,7
Nonpriority Creditor's Name	_		
P.O. Box 10438	When was the debt incurred?	08/2013	
MAC X2505-036			
Des Moines, IA 50306  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,	· · · · · · · · · · · · · · · · · · ·	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	I	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 20,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 20,000.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 142,256.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 142,256.00

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this inform	mation to identify your	case:		
Debtor 1	Kathleen Ann Ha			
	First Name	Middle Name	Last Name	 I
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	DISTRICT OF NEVADA	<b>A</b>	
Case number				
(if known)				Check if this is an
				amended filing

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	rerson or	Name, Number	r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

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Fill in this infor	mation to identify your	case:			
Debtor 1	Kathleen Ann Hai	rrigan			
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF NEVADA			
Case number (if known)					☐ Check if this is an amended filing
Official Fo	orm 106H • H: Your Cod	ebtors			12/15
people are filing fill it out, and nu	g together, both are equ umber the entries in the	ally responsible for supply	ing correct information	on. If more space is r	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
1. Do you h	nave any codebtors? (If y	you are filing a joint case, do	not list either spouse a	s a codebtor.	
□ No ■ Yes					
		lived in a community pro Nevada, New Mexico, Puer			ty states and territories include
☐ No. Go to	o line 3.				
Yes. Did	your spouse, former spou	use, or legal equivalent live	with you at the time?		
□ No	<b>1</b>				
■ Ye					
	In which community state	e or territory did you live?	-NONE-	Fill in the name a	nd current address of that person.
	Name of your spouse, former spo Number, Street, City, State & Zip	ouse, or legal equivalent Code			
in line 2 ag	ain as a codebtor only i ), Schedule E/F (Official	f that person is a guaranto	r or cosigner. Make su	ure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	nn 1: Your codebtor Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
4500	es Harrigan Falkirk Bay Oxnard ard, CA 93035			■ Schedule D, I □ Schedule E/F □ Schedule G _ Nationstar More	, line

Schedule H: Your Codebtors

Fill	in this information to identify your ca	ase:				ļ					
Del	btor 1 Kathleen An	nn Harrigan									
	btor 2 buse, if filing)				_						
Uni	ited States Bankruptcy Court for the	: DISTRICT OF NEVA	DA								
Case number (If known)						Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:					
0	fficial Form 106I					M	M / DD/ Y	/YYY			
S	chedule I: Your Inc	ome								12/15	
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The second of the ployment of the	are married and not fili Ir spouse is not filing w	ng jointly, and your ith you, do not inclu	spouse i	is liv mati	ing with yon about	you, incl your spe	ude infori ouse. If m	mation abou ore space is	t your needed,	
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-f	iling spouse		
	If you have more than one job,		☐ Employed				☐ Employed				
	attach a separate page with information about additional employers.	Employment status	■ Not employed				☐ Not employed				
	Include part-time, seasonal, or	Occupation Employer's name									
	self-employed work.  Occupation may include student or homemaker, if it applies.	Employer's address									
		How long employed t	here?								
Pai	rt 2: Give Details About Mor	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. In	clude your no	n-filing	
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	empl	oyers for t	hat perso	on on the l	ines below. If	you need	
						For Deb	tor 1		ebtor 2 or ing spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	_	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	_	
4.	Calculate gross Income. Add lin	ne 2 + line 3		4.	\$		0.00	\$	N/A		

Official Form 106I Schedule I: Your Income page 1

Debtor 1		Kathleen Ann Harrigan			umber (if known	)			
				For I	Debtor 1		For Debtor non-filing s		
	Cop	y line 4 here	4.	\$	0.00	) 3	\$	N/A	-
5.	List	all payroll deductions:							
٠.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00		\$	N/A	_
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b. 5c.	\$ 	0.00	_	\$ \$	N/A N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$—	0.00	_	\$	N/A	_
	5e.	Insurance	5e.	\$	0.00	_	\$	N/A	_
	5f.	Domestic support obligations	5f.	\$	0.00	_	\$	N/A	_
	5g.	Union dues	5g.	\$	0.00	_	\$	N/A	_
	5h.	Other deductions. Specify:	5h.+	\$		+ 5	\$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	<u> </u>	\$	N/A	-
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	) ;	\$	N/A	_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00		\$	N/A	
	8b.	Interest and dividends	8b.	\$—	0.00		\$	N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$	2,250.00	_	\$	N/A	_
	8d.	Unemployment compensation	8d.	\$—	0.00	_	\$	N/A N/A	_
	8e.	Social Security	8e.	\$	1,552.00	_	\$	N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.	\$	0.00 304.00	<u>)                                    </u>	\$	N/A N/A	-
	8h.	Other monthly income. Specify: FedEx Pension	8h.+	\$	595.00	) + :	\$	N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	4,701.00	)	\$	N/A	Δ
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$	4	,701.00 +	\$	N/A	= \$	4,701.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.							
11.	State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00								
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						\$	4,701.00
								Combin	ned y income
13.	Do y	you expect an increase or decrease within the year after you file this form No.  Yes. Explain:	?						y income

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	uir casa.			1		
	otor 1					Chr	eck if this is:	
Dep	ntor r	Kathleen An	n Harriga	ın			An amended filing	
	otor 2 ouse, if filing)						A supplement show 13 expenses as of	wing postpetition chapter
``		untoy Court for the	· DISTRI	CT OF NEVADA			MM / DD / YYYY	
		upicy Court for the	. DISTRI	CT OF NEVADA			WIWI / DD / TTTT	
	e number nown)							
Of	fficial Fo	rm 106J						
		J: Your I						12/1
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Par		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to	oline 2. I <b>s Debtor 2 live i</b>	in a separ	ate household?				
	□ N							
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	btor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								□ No □ Yes
							<del>_</del>	□ No
								Yes
								□ No
3.	Do vour ext	enses include	_	M-				☐ Yes
0.	expenses of	f people other to d your depende	han $_{m \Box}$	No Yes				
				_				
Est exp	imate your ex	ate Your Ongoi openses as of you openate after the b	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this followed the design of the	orm as a s e <i>J</i> , check t	supplement in a Cha the box at the top o	apter 13 case to report of the form and fill in the
the		h assistance an		government assistance it luded it on <i>Schedule I:</i> Y			Your exp	enses
`		,						
4.		or home owners and any rent for the		ses for your residence. In r lot.	nclude first mortgag	e 4.	\$	0.00
	If not includ	led in line 4:						
		estate taxes				4a.	·	145.00
		rty, homeowner's				4b.	· ———	125.00
		maintenance, re owner's associat	•	ıpkeep expenses dominium dues		4c. 4d.	:	200.00 65.00
5.				our residence, such as ho	me equity loans	5.		0.00

Water, sewer, garbage collection 6b. Telephone, cell phone, Internet, satellite, and cable services 6c. Other. Specify: 6d. Other. Specify: 7. Inildcare and children's education costs 8. Othing, laundry, and dry cleaning 9. Personal care products and services 10. Edical and dental expenses 11. Inansportation. Include gas, maintenance, bus or train fare. On to include car payments. 12. Intertainment, clubs, recreation, newspapers, magazines, and books 13.	\$ 175.00 \$ 150.00 \$ 160.00 \$ 0.00
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Telephone, cell phone, Internet, satellite, and cable services  Cother, Specify: Cother, Sp	\$ 160.00
d. Other. Specify: 6d. Other. Specify: 7. hold and housekeeping supplies 7. hold and housekeeping supplies 8. 8. othing, laundry, and dry cleaning 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9.	
noid and housekeeping supplies niddcare and children's education costs stream of children's education costs stream of children's education costs edical and dental expenses dictical and dental expenses ansportation. Include gas, maintenance, bus or train fare. on the include car payments. intertainment, clubs, recreation, newspapers, magazines, and books naritable contributions and religious donations surance. on the include insurance deducted from your pay or included in lines 4 or 20. ia. Life insurance ib. Health insurance ib. Health insurance ib. Other insurance, specify: ixes. Do not include taxes deducted from your pay or included in lines 4 or 20. ixes. Do not include taxes deducted from your pay or included in lines 4 or 20. ixes. Do not include taxes deducted from your pay or included in lines 4 or 20. ixes. Do not include taxes deducted from your pay or included in lines 4 or 20. ixes. Do not include taxes deducted from your pay or included in lines 4 or 20. ixes. Do not include taxes deducted from your pay or included in lines 4 or 20. ixes. Do not include taxes deducted from your pay or included in lines 4 or 20. ixes. Do not include taxes deducted from your pay or included in lines 4 or 20. ixes. Do not include taxes deducted from your pay or included in lines 4 or 20. ixes. Car payments for Vehicle 1 ixes. Car payments for Vehicle 2 ixes. On the insurance, and support that you did not report as educted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). ixes ducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). ixes ducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). ixes ducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). ixes ducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). ixes ducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). ixes ducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). ixes ducted from your pay on line 5, S	\$ 0.00
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naritable contributions and religious donations surance.  In ot include insurance deducted from your pay or included in lines 4 or 20.  In a. Life insurance deducted from your pay or included in lines 4 or 20.  In a. Life insurance deducted from your pay or included in lines 4 or 20.  In a. Life insurance deducted from your pay or included in lines 4 or 20.  In a. Covering deducted from your pay or included in lines 4 or 20.  In a. Car payments for Vehicle 1  In a. Car payments for Vehicle 1  In a. Car payments for Vehicle 2  In a. Covering deducted from your pay or included in lines 4 or 20.  In a. Car payments for Vehicle 2  In a. Car payments for Vehicle 2  In a. Covering deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  In a. Hortzages on the payments you make to support others who do not live with you.  In a. Mortgages on other property expenses not included in lines 4 or 5 of this form or on Schedule I: Your land the payments you make to support others who do not live with you.  In a. Mortgages on other property expenses not included in lines 4 or 5 of this form or on Schedule I: Your land the payments you make to support others who do not live with you.  In a. Mortgages on other property expenses not included in lines 4 or 5 of this form or on Schedule I: Your land the payments you make to support others who do not live with you.  In a. Mortgages on other property expenses not included in lines 4 or 5 of this form or on Schedule I: Your land the payments you make to support others who do not live with you.  In a. Mortgages on other property expenses not included in lines 4 or 5 of this form or on Schedule I: Your land the payments your more your land to report as a payment in the	<u> </u>
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2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 2c. Add line 22a and 22b. The result is your monthly expenses.	
c. Add line 22a and 22b. The result is your monthly expenses.	\$ 3,557.00
	\$
alculate your monthly net income	\$ 3,557.00
	<u> </u>
Ba. Copy line 12 (your combined monthly income) from Schedule I. 23a.	\$ 4.704.00
Bb. Copy your monthly expenses from line 22c above. 23b.	-,
io. Copy your monthly expenses nonnine 220 above. 230.	-\$ 3,557.00
sc. Subtract your monthly expenses from your monthly income.	
The result is your <i>monthly net income</i> . 23c.	\$ 1,144.00
, , ,	
you expect an increase or decrease in your expenses within the year after you file this	
r example, do you expect to finish paying for your car loan within the year or do you expect your mortgage p odification to the terms of your mortgage?	
, , , , , , , , , , , , , , , , , , , ,	ayment to increase or decrease because
No. Yes. Explain here:	ayment to increase or decrease because

	mation to identify your			
Debtor 1	Kathleen Ann Ha	rrigan Middle Name	Last Name	
Debtor 2	First Name	Middle Name	Last Name	
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA		
Case number (if known)				☐ Check if this is an amended filing
Official Ford		an Individual D	ebtor's Schedu	les 12/15
ou must file th btaining mone ears, or both. 1	is form whenever you fi y or property by fraud i I8 U.S.C. §§ 152, 1341, 1	r, both are equally responsik ile bankruptcy schedules or n connection with a bankrup	ole for supplying correct inform	
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Filli	n this inforn	nation to identify you	r case:					
Deb	tor 1	Kathleen Ann Ha	arrigan					
		First Name	Middle Na	ame	Last Name			
Deb		First Name	Middle Ni		Last Name			
(Spou	se if, filing)	First Name	Middle Na	ame	Last Name			
Unite	ed States Ba	nkruptcy Court for the:	DISTRICT	OF NEVADA				
Case	e number							
(if kno	wn)			_			☐ CI	heck if this is an
							ar	mended filing
Off	icial Fo	rm 107						
Sta	tement	of Financial	Affairs fo	r Individ	uals Filing for E	Bankruptcy	,	4/1
					re filing together, both are			olvina correct
infor	mation. If m	ore space is needed,	attach a separ		his form. On the top of ar			
numl	per (if knowi	n). Answer every que	stion.					
Part	1: Give D	Details About Your Ma	rital Status and	d Where You	Lived Before			
1.	What is you	r current marital statu	ıs?					
	_							
	☐ Married							
	Not mar	rried						
2.	During the la	ast 3 years, have you	lived anywhere	e other than w	here you live now?			
	■ Na							
	■ No □ Vas Lis	et all of the places you l	ived in the last 3	Rypars Do no	t include where you live no	A/		
	<b>–</b> 103. Lis	it all of the places you i	ived in the last c	ycars. Do no	t include where you live no	vv.		
	Debtor 1 Pr	ior Address:		tes Debtor 1 ed there	Debtor 2 Prior A	ddress:		Dates Debtor 2 lived there
						_		
					al equivalent in a commu ada, New Mexico, Puerto F			
	_	, , , , , , , , , , , , , , , , , , , ,	,,		,	,		,
	□ No							
	Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your (	Codebtors (Off	icial Form 106H).			
Part	2 Explai	in the Sources of You	r Income					
	•							
					g a business during this y		evious calen	dar years?
					Il businesses, including par together, list it only once u			
	_	,		,	, ,			
	■ No							
		I in the details.						
			Debtor 1			Debtor 2		
			Sources of in		Gross income	Sources of inc		Gross income
			Check all that	apply.	(before deductions and exclusions)	Check all that a	ipply.	(before deductions and exclusions)
					oxordorio)			and oxoldsions

Official Form 107

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Case number (if known)

Include and other	income regarder public bene	dless of wheth fit payments;	ner that income is taxable. Ex pensions; rental income; inte	o previous calendar years? amples of other income are a rest; dividends; money colled you received together, list it o	alimony; child supp cted from lawsuits;	ort; Social Security, unemployment royalties; and gambling and lottery ebtor 1.
List eacl	h source and	the gross inco	ome from each source separa	ately. Do not include income t	hat you listed in lin	ne 4.
□ No						
Ye	s. Fill in the d	etails.				
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below	
	ary 1 of curre u filed for ba		Pension, Social Security and Alimony	\$32,907.00		
	endar year: to December	31, 2018 )	Pension, Social Security and Alimony	\$56,412.00		
	endar year be to December		Pension, Social Security and Alimony	\$56,412.00		
art 3:	iot Contoin De	oumanta Vau	Made Before You Filed for	Donkruntov		
□ No	Neither D individual  During the No.  Yes  * Subject	ebtor 1 nor E primarily for a e 90 days before Go to line 7 List below e paid that cr not include to adjustmen or Debtor 2 of e 90 days before Go to line 7 List below e include pay	personal, family, or househouse you filed for bankruptcy, do not creditor to whom you pareditor. Do not include payme payments to an attorney for ton 4/01/22 and every 3 years both have primarily consore you filed for bankruptcy, do not creditor to whom you pared to house the filed for bankruptcy, do not creditor to whom you pared for you filed for bankruptcy, do not creditor to whom you pared for you filed for bankruptcy, do not creditor to whom you pared for you filed for bankruptcy.	umer debts. Consumer debted purpose."  id you pay any creditor a total day and a total of \$6,825* or more into the for domestic support oblights bankruptcy case. It is after that for cases filed on the formulation will be under the formulation of \$600 or more and the folial purpose.	in one or more pay gations, such as ch or after the date o all of \$600 or more?	ments and the total amount you ild support and alimony. Also, do
Credito	or's Name an	•	Dates of payme	ent Total amount	Amount you	Was this payment for
				paid	still owe	_
	otors Finan ox 20835	ICE	May 2019	\$1,950.00	\$20,881.00	☐ Mortgage

Debtor 1 Kathleen Ann Harrigan

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7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. If alimony.	artners; relatives of any gen n control, or owner of 20% o	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporation gent, including one fo
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
В.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  ■ No □ Yes. Fill in the details.  Case title					t or custody
	Case number		,			
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address	Describe the Property		oreclosed, garnid	shed, attached	d, seized, or levied?  Value of the property
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed No Yes. Fill in the details.			nancial institution	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date take	action was	Amount
	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  No Yes  List Certain Gifts and Contributions	ccy, was any of your prope another official?	erty in the possess	ion of an assigne	e for the bene	efit of creditors, a
13.	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift.	otcy, did you give any gifts	s with a total value	of more than \$60	00 per person'	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave lifts	Value
	Person to Whom You Gave the Gift and Address:					

Debtor 1 Kathleen Ann Harrigan

Case number (if known)

14.	Within 2 years before you filed for bank ■ No	kruptcy,	did you give any gifts or contribution	s with a tota	I value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or	contribu	tion.			
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed		Dates you contributed	Value
Pai	tt 6: List Certain Losses					
15.	Within 1 year before you filed for bankr or gambling?	uptcy o	r since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster
	■ No					
	Yes. Fill in the details.					
	Describe the property you lost and	Descr	ibe any insurance coverage for the lo	oss	Date of your	Value of property
	how the loss occurred	Includ	e the amount that insurance has paid. L nce claims on line 33 of <i>Schedule A/B</i> :	ist pending	loss	lost
Pai	rt 7: List Certain Payments or Transfe			, ,		
16.	Within 1 year before you filed for bankr consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition  No	r prepari	ing a bankruptcy petition?			rty to anyone you
	Yes. Fill in the details.				_	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
	Law Office of Miguel Lopez 7620 Tiny Tortoise Las Vegas, NV 89149				07/2019	\$850.00
	Dollar Learning Foundation 21900 Burbank Blvd Woodland Hills, CA 91367				07/2019	\$10.00
17.	Within 1 year before you filed for bankr promised to help you deal with your crubo not include any payment or transfer the	editors o	or to make payments to your creditors		r transfer any prope	rty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid		Description and value of any prope	ortv	Date payment	Amount of
	Address		transferred	erty	or transfer was made	payment
8.	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have a second in the course of the course of your part of years.  No  Yes. Fill in the details.	our busii ers made	ness or financial affairs? as security (such as the granting of a se			
	Person Who Received Transfer		Description and value of	Describe	any property or	Date transfer was
	Address		property transferred		received or debts	made
	Person's relationship to you					

Debtor 1 Kathleen Ann Harrigan

Debtor 1	Kathleen	Ann	Harrigan
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Case number (if known)

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.						
	Name of trust	Description and	value of the pro	perty trans	sferred	Date Transfer was made	
Par	List of Certain Financial Accounts, Instru	uments, Safe Deposi	t Boxes, and St	orage Unit	s		
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or c houses, pension funds, cooperatives, associated No	other financial accou	nts; certificates	of deposi		,	
		ast 4 digits of ccount number	Type of accordinstrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed fo	r bankruptcy, aı	ny safe dep	oosit box or other deposit	ory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?  No Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the contents		Do you still have it?	
	Do you hold or control any property that some for someone.  No Yes, Fill in the details.		ude any proper	ty you bori	rowed from, are storing fo	or, or hold in trust	
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value	
	t 10: Give Details About Environmental Inform						
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surfac	e water, ground				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa Hazardous material means anything an environ	s defined under any al sites.	environmental l				
	hazardous material, pollutant, contaminant, or similar term.						

Official Form 107

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 Kathleen Ann Harrigan

Case number (if known)

24.	Has	any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environme	ental law?				
		No							
	ш	Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Hav	e you notified any governmental unit of	any release of hazardous material?						
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Hav	e you been a party in any judicial or adm	ninistrative proceeding under any envi	ronmental law? Include settlements a	and orders.				
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	t 11:	Give Details About Your Business or C	Connections to Any Business						
27.	Witl	nin 4 years before you filed for bankrupto	cy, did you own a business or have an	y of the following connections to any	/ business?				
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		☐ A partner in a partnership							
		☐ An officer, director, or managing executive of a corporation							
		☐ An owner of at least 5% of the voting or equity securities of a corporation							
		No. None of the above applies. Go to Part 12.							
		Yes. Check all that apply above and fill	in the details below for each business	<b>3.</b>					
		siness Name dress	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN					
	(Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Dates business existed								
28.		Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
		No Yes. Fill in the details below.							
		me dress mber, Street, City, State and ZIP Code)	Date Issued						
	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,							

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Debtor 1	Kathleen Ann Harrigan		Case number (if known)
Part 12:	Sign Below		
are true a		g a false statement, concealing p	ments, and I declare under penalty of perjury that the answers roperty, or obtaining money or property by fraud in connection rup to 20 years, or both.
Kathlee	leen Ann Harrigan n Ann Harrigan e of Debtor 1	Signature of Debtor	2
Date J	uly 18, 2019	Date	
Did you a ■ No □ Yes	ttach additional pages to Your State	ment of Financial Affairs for Ind	ividuals Filing for Bankruptcy (Official Form 107)?
Did you p ■ No	ay or agree to pay someone who is	not an attorney to help you fill o	ut bankruptcy forms?
☐ Yes. N	ame of Person Attach the Ban	kruptcy Petition Preparer's Notice,	Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your case:		
Debtor 1	Kathleen Ann Harrigan		
	First Name Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name Middle Name	Last Name	
United States Ba	ankruptcy Court for the: DISTRICT OF N	EVADA	
Case number			
(if known)			☐ Check if this is an
			amended filing
Official Fo	orm 108		
		viduala Filina Undan Obanta	<b>. 7</b>
Statemer	nt of intention for indi	viduals Filing Under Chapte	12/15
	State of Cities and the state of the state o	III and this farm If	
	ividual filing under chapter 7, you must f	ill out this form it:	
_	e claims secured by your property, or		
	sed personal property and the lease has	not expired. r you file your bankruptcy petition or by the date set	for the meeting of creditors
		he time for cause. You must also send copies to the	
on the	form		
If two married pe	eople are filing together in a joint case, b	oth are equally responsible for supplying correct info	ormation. Both debtors must
	nd date the form.	. ,	
Be as complete	and accurate as possible. If more space	is needed, attach a separate sheet to this form. On th	e top of any additional pages.
	our name and case number (if known).	,,,,,	
Part 1: List Y	our Creditors Who Have Secured Claims		
Fait I. List I	our Creditors who have Secured Claims		
		D: Creditors Who Have Claims Secured by Property (	Official Form 106D), fill in the
information be Identify the cr	elow. editor and the property that is collateral	What do you intend to do with the property that	Did you claim the property
·	,	secures a debt?	as exempt on Schedule C?
Creditor's K	(IA Motors Finance		П
-	MA MOTOIS FINANCE	Surrender the property.	□ No
name:		Retain the property and redeem it.	■ Yes
Description of	2015 Hyundai Genesis 63,000	☐ Retain the property and enter into a Reaffirmation Agreement.	
property	miles	Retain the property and [explain]:	
securing debt:		,	
	Street, Henderson NV 89044		
Creditor's	lationstar Mortgage	■ Surrender the property.	■ No
name:		☐ Retain the property and redeem it.	<b>–</b> NO
		Retain the property and redeem it.  Retain the property and enter into a	☐ Yes
Description of		Reaffirmation Agreement.	
property	93035 Ventura County	☐ Retain the property and [explain]:	
securing debt:	Debtor Surrendered her interest in this property via her 2014		
	Divorce.		
	* · * * ·		

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Official Form 108

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Debtor 1	Kathleen Ann Harrigan	Case number (if known)	
Dagarila			Mill the lease be seen and
Describ	e your unexpired personal property leases		Will the lease be assumed?
Lessor's	name: on of leased		□ No
Property			☐ Yes
Lessor's Descript	name: ion of leased		□ No
Property			☐ Yes
	on of leased		□ No
Property	:		☐ Yes
Lessor's	name: on of leased		□ No
Property			☐ Yes
Lessor's			□ No
Property	ion of leased :		☐ Yes
Lessor's			□ No
Property	ion of leased :		☐ Yes
Lessor's	name: ion of leased		□ No
Property			☐ Yes
Part 3:	Sign Below		
Under pe	enalty of perjury, I declare that I have indicated my intention about an that is subject to an unexpired lease.	y property of my estate that see	cures a debt and any personal
	Kathleen Ann Harrigan X		
	thleen Ann Harrigan nature of Debtor 1	nature of Debtor 2	
Dat	e <b>July 18, 2019</b> Date		

B2030 (Form 2030) (12/15)

## United States Bankruptcy Court District of Nevada

In	re	Kathleen Ann	Harr	igan			Case No				
						Debtor(s)	Chapter	7			
		DIS	CLO	OSURE OF COMP	ENSATI	ON OF ATTO	RNEY FOR I	DEBTOR(S)			
1.	con	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:									
		For legal service	es, I h	have agreed to accept			s	850.00			
		Prior to the filin	ng of t	his statement I have receive	ed		\$	850.00			
		Balance Due					\$	0.00			
2.	\$	<b>335.00</b> of the	filing	g fee has been paid.							
3.	The	e source of the co	mpens	sation paid to me was:							
		Debtor		Other (specify):							
4.	The	e source of compe	ensatio	on to be paid to me is:							
		Debtor		Other (specify):							
5.		I have not agreed	d to sh	nare the above-disclosed cor	mpensation v	ith any other persor	unless they are me	embers and associate	es of my law firm.		
				the above-disclosed compet, together with a list of the r					ny law firm. A		
6.	In	return for the abo	ve-dis	sclosed fee, I have agreed to	render legal	service for all aspec	ts of the bankruptc	y case, including:			
	b. c.	Preparation and f	iling of f the d	s financial situation, and ren of any petition, schedules, si debtor at the meeting of cred eeded]	tatement of a	ffairs and plan whic	h may be required;	-	ankruptcy;		
7.	Ву	Represen	tatior	otor(s), the above-disclosed n of the debtors in any corsary proceeding.				nces, relief from s	stay actions or		
		reaffirmat	ion a	vith secured creditors to greements and applicat avoidance of liens on h	tions as ne	eded; preparatio					
					CERTI	FICATION					
this		ertify that the fore kruptcy proceedin		is a complete statement of	any agreeme	nt or arrangement fo	r payment to me fo	r representation of the	he debtor(s) in		
_	July	y 18, 2019				/s/ Miguel Lopez					
	Date	ę				Miguel Lopez 11 Signature of Attorn					
						Law Office of Mi	guel Lopez, P.C.				
						7620 Tiny Tortoi Las Vegas, NV 8					
						(702) 987-3030	Fax: (702) 479-72	230			
						mlopez@lopezb	kiaw.com				

## **United States Bankruptcy Court**District of Nevada

Mathiana Ann Hamina								
Kathleen Ann Harrigan		Case No.						
	Debtor(s)	Chapter	7					
VERIFICATION OF CREDITOR MATRIX								
ove-named Debtor hereby verifies	that the attached list of creditors is true and c	correct to the best	of his/her knowledge.					
July 18, 2019	/s/ Kathleen Ann Harrigan							
	ve-named Debtor hereby verifies	VERIFICATION OF CREDITOR  ove-named Debtor hereby verifies that the attached list of creditors is true and of	VERIFICATION OF CREDITOR MATRIX  eve-named Debtor hereby verifies that the attached list of creditors is true and correct to the best  July 18, 2019  /s/ Kathleen Ann Harrigan					

Signature of Debtor

Kathleen Ann Harrigan 2465 Luminous Stars Street Henderson, NV 89044

Miguel Lopez Law Office of Miguel Lopez, P.C. 7620 Tiny Tortoise Las Vegas, NV 89149

Aargon Agency Acct No xx7608\*\*\*\* 8668 Spring Mountain Road Las Vegas, NV 89117

Aargon Agency Acct No xx7708\*\*\*\* 8668 Spring Mountain Road Las Vegas, NV 89117

American Express
Acct No xxxxxxx2607\*\*\*\*
P.O. Box 981535
El Paso, TX 79998-1535

DSNB/Macy's Acct No xxxxxxxx4425\*\*\*\* P.O. Box 8218 Mason, OH 45040

IC Systems Collections Acct No 7332\*\*\*\* P.O. Box 64378 Saint Paul, MN 55164-0378

IC Systems Collections Acct No 9385\*\*\*\* P.O. Box 64378 Saint Paul, MN 55164-0378

Internal Revenue Service Acct No xxxxx7493 Centralized Insolvency Operations P.O. Box 7346 Philadelphia, PA 19101-7346

James Harrigan 4500 Falkirk Bay Oxnard Oxnard, CA 93035

JPMCB Card Services Acct No xxxxxxxx7215\*\*\*\* PO Box 15369 Wilmington, DE 19850 KIA Motors Finance Acct No xxxxxx0424\*\*\*\* P.O. Box 20835 Fountain Valley, CA 92728-0835

Nationstar Mortgage Acct No x3591\*\*\*\* P.O. Box 619096 Dallas, TX 75261-9741

Plus Four, Inc. Acct No x8670\*\* P.O. Box 95846 Las Vegas, NV 89193-5846

Portfolio Recovery Acct No xxxxxxxx5963\*\*\*\* 120 Corporate Blvd Norfolk, VA 23502

SYNCB/ToysRUs Acct No xxxxxxxx0306\*\*\*\* P.O. Box 965015 Orlando, FL 32896-5015

UCLA Medical Group Acct No xxxxx7493 PO Box 748156 Los Angeles, CA 90074-8156

## UMC

Acct No xxxxx7493 1800 W. Charleston Blvd. Las Vegas, NV 89102

Wells Fargo Bank, N.A. Acct No xxxxxxx2982\*\*\*\* P.O. Box 10438 MAC X2505-036 Des Moines, IA 50306